

# Late Independent Expenditure Report

Type or print in ink.  
Amounts may be rounded to whole dollars.

LATE INDEPENDENT EXPENDITURE REPORT

<b>NAME OF FILER</b> South Bay AFL-CIO Labor Council Issues Account sponsored by South Bay AFL-CIO Labor Council			<b>Date of This Filing</b> 02/09/2004  <b>Report No.</b> LIE92-40206  <input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)  <b>No. of Pages</b> 2	Date Stamp   Page 1 of 2	<b>CALIFORNIA FORM 496</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> ( ) -		<b>I.D. NUMBER (if applicable)</b> 1243364			
<b>STREET ADDRESS</b>					
<b>CITY</b> San Jose	<b>STATE</b> CA	<b>ZIP CODE</b> 95125			

## 1. List Only One Candidate or Ballot Measure

<b>NAME OF CANDIDATE SUPPORTED OR OPPOSED</b>			<b>NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED</b> Budget Accountability Act			
<b>OFFICE SOUGHT OR HELD/DISTRICT NO.</b>	<b>SUPPORT</b>	<b>OPPOSE</b>	<b>BALLOT NO./LETTER</b> 56	<b>JURISDICTION</b> STW	<b>SUPPORT</b> X	<b>OPPOSE</b>

## 2. Independent Expenditures Made

Attach additional information on appropriately labeled continuation sheets.

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
02/06/2004	Printing/Design for Walkpiece	\$2,696.05
02/06/2004	Data for Walkpiece	\$351.29
02/06/2004	Food for Volunteers	\$50.81
02/06/2004	Food for Volunteers	\$7.06
02/06/2004	Precint Maps	\$35.33

Reason for Amendment:

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**CALIFORNIA**  
**FORM 496**

NAME OF FILER  
South Bay AFL-CIO Labor Council Issues Account sponsored by South Bay AFL-CIO Labor Council

I.D. NUMBER (If applicable)  
1243364

## 3. Contributions of \$100 or More Received\*

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE**	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED	INTEREST RATES
1/26/2004	Mr. Mohinder Mann San Jose, CA 95126	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Self-Employed (Same)	\$150.00	If loan, enter interest rate, if any _____ %
1/26/2004	Mr. Lawrence Ramirez San Jose, CA 95113	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Self-Employed (Same)	\$150.00	If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %

\*Major donor and independent expenditure committees that do not receive contributions are not required to complete Part 3.

\*\*Contributor Codes  
IND - Individual  
COM - Recipient Committee (other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee

FPPC Form 496 (June/01)  
FPPC Toll-Free Helpline: 866/ASK-FPPC  
866/275-3772